

This is testimony submitted by SWAA, CT (Social Welfare Action Alliance) to the Appropriations Committee of the CT legislature on the Governor's Proposed Health and Human Services Budget for 2022-2023.

(The Ct SWAA chapter is a group of professional social workers, allies and community activists working in partnership with those communities who identify as being most negatively impacted by current societal inequities in efforts to educate, discuss and organize around correcting these inequities. We believe that "those closest to problem are closest to the solution but are furthest from the resources and power." We work to bring the opinion of those subject to those inequities in Ct to the source of power, in this case the Connecticut Legislators. Our stated priorities are: Advancing 1-racial, economic and social justice, 2- health care as a human right, 3-policing justice and prison transformation leading to abolition, 4-inclusive voter and election reform 5-tax equity and fairness.)

Testimony Background

From our collective experience as social workers, and advocates and from our conversations and work with citizens with "lived experience" of receiving CT minimum wage of \$13 an hour or those living with chronic health conditions or other disabilities, those living on only social security, single parent household or those having undocumented residents in their families, it is SWAA, CT's belief that CT "safety net services" are underfunded in the governors 2022 budget recommendations. We ask the committee to keep in mind that working 40 hours a week at the current minimum wage of \$13 an hour provides a yearly income of \$27,040 before taxes (if you work 40 hours a week for 52 weeks). Many people work or have worked two or more jobs to earn these amounts and many work without affordable daycare, health insurance, housing or paid sick time. We also request that the committee keep in mind that the average social security check for the elderly and disabled in the US in 2022 is \$1658 or \$19,896 a year and SSI for elderly or disabled is only \$841 a month or \$10,092 a year. We also note that many of the people in CT who are struggling to make ends meet during this period of inflation and pandemic are or have been on the front lines in the pandemic, as nurses' aides, restaurant staff, home care, day care, health care workers, drivers and delivery workers, grocery or store clerks, or providers of other community based services. SWAA Ct asks you to please make your decisions on funding remembering these facts and only after you have heard the testimony of those with "lived experience" working minimum wage jobs or living on limited income. We also ask you to keep in mind that in 2022 while direct human and health services are provided by state employees in state run facilities, many of the direct health and human clinical and community services are provided by community based nonprofits who because of years of level or reduced funding have had difficulty maintaining services and retaining staff in the pandemic.

In the 2022 CT Human and Health services budget SWAA, CT would recommend increased access to and increased funding for a robust human services and health care continuum of care for residents of all ages including home based services, local community designed and implemented preventative and treatment services, residential care, and hospital level care all that include "community workers (ie community health workers, peer support specialist, recovery specialists and doulas) teamed up with quality professional social workers, health care providers, medical specialty providers and other human service professionals. SWAA, CT suggests that all residents in 2022 should have access to affordable healthcare, food security, housing, childcare, paid sick time and crisis financial assistance in CT in 2022.

SWAA, CT recommends full funding in 2022 for mental health mobile crisis incorporating 988 and 211 with increased funding for community based non-profit organizations and financial support for crisis services and these nonprofits agencies and using community health workers, mental health peers and recovery specialists and doulas as part of the teams and services.

Testimony RE DDS

SWAA, CT recommends that the nonprofit agencies contracted with DDS and DDS employees have the needed funds to provide the array of services required while paying fair wages with affordable health care and sick time for those working with and for DDS clients. Also, SWAA, CT feels it is important that the DDS budget only supports program improvements, innovations or modifications in day programs, home care, employment supports and residential services that are supported by consumers and family and are not just cost cutting measures.

Testimony Re DMHAS

SWAA, CT recommends substantial increased funding from the Department of Mental Health budget for the many nonprofits and community agencies to maintain their current service level and staffing and to honor the community outcry for more mental health services particularly for children and adolescents in school and community as a result of years of underfunding and the challenge of the covid pandemic.

SWAA, CT also urges appropriations to 1)create a true continuum of care with additional inpatient and residential facilities especially for adolescents and children to meet the increased needs for mental health services brought on by the pandemic 2)fully fund the new federally mandated 988 crisis line and 24/7 statewide mobile crisis teams using a team approach including social workers and peer support workers, substance abuse recovery specialists with an array of community support options including peer respite and other needed community based services as alternatives to hospitalization for all ages and 3)maintain the funding for suicide prevention and community prevention advisory boards creating ongoing community input into needed mental health and addiction services.

Testimony Re DCF

SWAA, CT supports increased funding for nonprofit agencies to provide in home and community support services for families served by DCF by professional and para professional staff to assure provide reasonable salary rates with having access to affordable health care and paid sick time. SWAA, CT believes DCF staff should be considered first responders and essential workers. We also support that DCF should be given the funds that encourages development of creative and innovative community based services initiated and created with input from direct care staff and those families most effected by the DCF services such as peer parenting programs and NOT use the state funds to develop programs that primarily effect cost savings. We believe the DCF budget also needs to provide funds for increased concrete services such as childcare, housing, employment and mental health supports aimed to increase family success and/or to facilitate family reunification. Also we suggest that the budget should include funding for pilot projects using community based parent peers for parenting programs.

Testimony RE DSS

SWAA CT supports 1) modification TNF guidelines to provide more financial aid and longer time limits making this program a more realistic safety net service for families in financial crisis. 2) that appropriations committee provide the funding to increase the guidelines for eligibility for **All Husky** programs (A,B,C, and D) to at least 200% of the federal poverty level(FPL is \$13,590 for one person and \$27,750 for family of 4). These changes hopefully will help families and individuals to avoid “the benefit cliffs” that now exist for low wage working families and low income elders 3)increase the rates for Medicaid payment for adult dentistry so those payment rates at the very least are equal to the rates paid for pediatric dentistry. 4) funding be allocated to **immediately** offer eligibility for Husky for all children who meet the financial guidelines up to age 18 as well as pregnant women regardless of immigration status 5)move the grant program funding for the Community Health Workers Grant program from DPH to DSS so 2.7 million allocated can be distributed and spent to hire community health workers budgeted for in 2022 6) decreasing the cost of prescription medication for residents of all ages particularly those drugs most commonly used (ie inhalers, diabetes medications) 7) providing doulas for women’s health and provide subsidies for independent hospitals outside of the urban areas that are struggling financially.

Testimony RE DPH

SWAA, CT has been made aware that implementation of community-based programing funded and allocated for distribution by the legislature is often delayed by the DPH seemingly convoluted and complicated contracting system. This is illustrated by the Community Health Workers grants program year long delay mentioned above. SWAA, CT suggests that there be funding to facilitate a DPH process so community based public health programing funding be distributed in a timely manner and public health funds aimed at addressing public health issues such as the pandemic recovery, childrens health, health equity, racism and gun violence to name a few, are able to be processed and quickly put in action once funded.

Thank you for your time and for reviewing this testimony. SWAA CT(Social Welfare Action Alliance) Coordinating Committee